

Public Employees' Retirement Fund

Request for State Income Tax Withholding

1. You may select any amount over \$10.00 that you wish to have withheld from your pension payment. This withholding will be reported to you on a W-2P at the end of each year as Indiana Income Tax withheld. The County Adjusted Gross Income Tax (CAGIT), County Option Income Tax (COIT), or the County Economic Development Income Tax (CEDIT) cannot be withheld. However, if you elect to overpay your state income tax liability, this overpayment may be applied to your county liability.
2. Please complete all blocks except block A. (Annuity contract claim or identification number). Leave this block blank.
3. Be sure to sign and date your form.
4. When you have completed and signed your form, detach it from these instructions and return it to the following address:

Public Employees' Retirement Fund
143 West Market Street
Suite 800
Indianapolis, IN 46204

-----DETACH HERE-----



FORM **WH-4P**
Revised 9/90

STATE OF INDIANA

Annuitant's Request for State Income Tax Withholding

Type or print full name	Social Security Number	
Home Address (Number and street)		
City, State, and ZIP code		
A. Annuity contract claim or identification number	A.	
B. Enter the amount to be withheld from each annuity or pension payment	B.	
I request voluntary income tax withholding from my annuity or pension payments		

(signature of annuitant)

(Date)